

Application Data Sheet

Application Information

Application number::
Filing Date:: 12/15/2003
Application Type:: Regular
Subject Matter:: Utility
Suggested classification::
Suggested Group Art Unit:: 3739
Title:: A Medical Robotic Arm that is Attached to an
Operating Table
Attorney Docket Number:: 022001-000843US
Request for Early Publication:: No
Request for Non-Publication:: No
Suggested Drawing Figure::
Total Drawing Sheets:: 22
Small Entity?:: Yes
Petition included?:: No
Secrecy Order in Parent Appl.:: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: YULUN
Family Name:: WANG
City of Residence:: Goleta
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 370 Vereda Leyenda
City of Mailing Address:: Goleta
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 93117

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: DARRIN
Family Name:: UECKER
City of Residence:: Santa Barbara
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 220 Santa Rosa Blvd.
City of Mailing Address:: Santa Barbara
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 93109

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: JEFF
Middle Name:: D.
Family Name:: WILSON
City of Residence:: Santa Barbara
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 1300 Portesuello
City of Mailing Address:: Santa Barbara
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 93105

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: CHARLES

Middle Name:: S.
Family Name:: JORDAN
City of Residence:: Santa Barbara
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 2431 Calle Galicia
City of Mailing Address:: Santa Barbara
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 93109

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: JAMES
Middle Name:: W.
Family Name:: WRIGHT
City of Residence:: Santa Barbara
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 319 Santa Cruz Blvd.
City of Mailing Address:: Santa Barbara
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 93109

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: MODJTABA
Family Name:: GHODOUSSI
City of Residence:: Santa Barbara
State or Province of Residence:: CA
Country of Residence:: US

Street of Mailing Address:: 602 Foxen Drive
City of Mailing Address:: Santa Barbara
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 93105

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

Representative Customer Number:: 20350

Domestic Priority Information

| Application:: | Continuity Type:: | Parent Application:: | Parent Filing Date:: |
|------------------|-------------------------|----------------------|----------------------|
| This Application | continuation of | 09/557,950 | 04/24/2000 |
| | continuation of | 08/873,190 | 06/11/1997 |
| | continuation-in-part of | 08/814,811 | 03/10/1997 |
| | continuation-in-part of | 08/603,543 | 02/20/1996 |

Assignee Information

Assignee Name:: Computer Motion, Inc.
Street of mailing address:: 950 Kifer Road
City of mailing address:: Sunnyvale
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 94086